

#### § 40.313

signed and dated by the SAP, and must contain the following delineated items:

- (1) Employee's name and SSN;
- (2) Employer's name and address;
- (3) Reason for the assessment (specific violation of DOT regulations and violation date);
- (4) Date(s) of the assessment;
- (5) SAP's education and/or treatment recommendation; and
- (6) SAP's telephone number.

(d) The SAP's written report concerning a follow-up evaluation that determines the employee has demonstrated successful compliance must be on the SAP's own letterhead (and not the letterhead of another service agent), signed by the SAP and dated, and must contain the following items:

- (1) Employee's name and SSN;
- (2) Employer's name and address;
- (3) Reason for the initial assessment (specific violation of DOT regulations and violation date);
- (4) Date(s) of the initial assessment and synopsis of the treatment plan;
- (5) Name of practice(s) or service(s) providing the recommended education and/or treatment;
- (6) Inclusive dates of employee's program participation;
- (7) Clinical characterization of employee's program participation;
- (8) SAP's clinical determination as to whether the employee has demonstrated successful compliance;
- (9) Follow-up testing plan;
- (10) Employee's continuing care needs with specific treatment, aftercare, and/or support group services recommendations; and
- (11) SAP's telephone number.

(e) The SAP's written report concerning a follow-up evaluation that determines the employee has not demonstrated successful compliance must be on the SAP's own letterhead (and not the letterhead of another service agent), signed by the SAP and dated, and must contain the following items:

- (1) Employee's name and SSN;
- (2) Employer's name and address;
- (3) Reason for the initial assessment (specific DOT violation and date);
- (4) Date(s) of initial assessment and synopsis of treatment plan;

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(5) Name of practice(s) or service(s) providing the recommended education and/or treatment;

(6) Inclusive dates of employee's program participation;

(7) Clinical characterization of employee's program participation;

(8) Date(s) of the first follow-up evaluation;

(9) Date(s) of any further follow-up evaluation the SAP has scheduled;

(10) SAP's clinical reasons for determining that the employee has not demonstrated successful compliance; and

(11) SAP's telephone number.

(f) As a SAP, you must also provide these written reports directly to the employee if the employee has no current employer and to the gaining DOT regulated employer in the event the employee obtains another transportation industry safety-sensitive position.

(g) As a SAP, you are to maintain copies of your reports to employers for 5 years, and your employee clinical records in accordance with Federal, state, and local laws regarding record maintenance, confidentiality, and release of information. You must make these records available, on request, to DOT agency representatives (*e.g.*, inspectors conducting an audit or safety investigation) and representatives of the NTSB in an accident investigation.

(h) As an employer, you must maintain your reports from SAPs for 5 years from the date you received them.

#### § 40.313 Where is other information on SAP functions and the return-to-duty process found in this regulation?

You can find other information on the role and functions of SAPs in the following sections of this part:

§ 40.3—Definition.

§ 40.347—Service agent assistance with SAP-required follow-up testing.

§ 40.355—Transmission of SAP reports.

§ 40.329(c)—Making SAP reports available to employees on request.

APPENDIX E TO PART 40—SAP EQUIVALENCY REQUIREMENTS FOR CERTIFICATION ORGANIZATIONS.